

OCT 06 2004

Appl. No. 09/998,391  
Amdt. dated 10/06/2004  
Reply to Office Action of 07/09/2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Application of:	:
Bupesh Gupta	:
Serial No: 09/998,391	: Before the Examiner:
	: Sathyanaraya R. Pannala
Filed: 11/29/2001	: Group Art Unit: 2177
Title: APPARATUS AND METHOD	: Confirmation No.: 7318
OF COMBINING BOOKMARKS IN	:
DIFFERENT SUB-FOLDERS INTO A	:
NEW SUB-FOLDER	:

AMENDMENT A

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action of July 09, 2004,  
please amend the above-identified Application as shown  
below and consider the following Remarks.

Amendments to the Specification begin on page 2 of this  
paper.

List of **CLAIMS** begins on page 8 of this paper.

Remarks begin on page 13 of this paper.

AUS920011026US1


PTO/SB/21 (02-04)

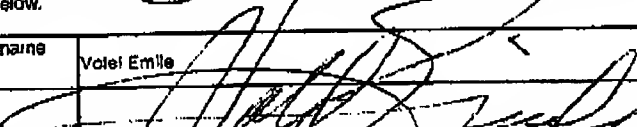
Approved for use through 07/31/2009. OMB 0631-0031

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/999,391
	Filing Date	11/29/2001
	First Named Inventor	Bupesh Gupta
	Art Unit	2177
	Examiner Name	Sathyaranya R. Pannala
	Attorney Docket Number	AUS920011026US1
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.62 or 1.63	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Volel Emile	
Signature		
Date	10/06/2004	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Volel Emile	
Signature		Date 10/06/2004

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